#### STATE OF NEW HAMPSHIRE

### $2018\ Statement$ of Income and Expenses

### for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

RECEIVED

·	f.
I. Name of Lobbyist(s) Cheryl Steinberg	DEC 1 0 2018
II. Name of lobbyist's partnership, firm or corporation, if any:	NEW HAMPSHIRE DEPARTMENT OF STATE
New Hampshire Legal Assistance	
(Name of partnership, firm or corporation)	
117 North State Street Concord, NH 03301	•
Business Address: (Street) (Town/City) (State	e) (Zip Code)
( ) 603-224-4107 ( ) 603-224-2053 e-mail (Fax)	csteinberg@nhla.org
<ul> <li>III. This statement covers: (Choose one – file separate reports for each client, OF reportable expense transactions which are not attributable to any one client).</li> <li>All reportable transactions occurring in the months prior to the reporting date relations.</li> </ul>	
(Full Name of Client as it appears on the Lobbyist Registration Form OR X All reportable transactions by the lobbyist (including the lobbyist's family), or the unrelated to any particular client.	•
IV. Date of Report April 25, 2018 ☐ July 25, 2018  Reports cover: activity from date of registration to 3/31/18 activity from 4/1/18 to 9/30/18  October 31, 2018 ☑ January 30, 2  activity from 7/1/18 to 9/30/18 activity from 10/1/18	o 6/30/18 2019 □
V. There have been no fees received and no reportable transactions made If this box is checked, complete just this form and submit it to the Secretary of State's Concord, NH 03301.	esince the last report.   Office, State House, Room 204,
VI. Check if additional reports are attached:	
If you have received fees or made expenditures, you must file Addendum A-Fe	
☐ If you have paid an honorarium or reimbursed expenses, you must file Addendur Expense Reimbursement	m B Report of Honorariums or
If you, your firm, or your family has made political contributions, you must file A	Addendum C-Political Contributions
Sworn Statement/Affirmation by Lobbyist  I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm and complete to the best of my knowledge and belief.  (Signature of lobbyist)  Cheryl Steinberg  (Print Name of lobbyist)	that the foregoing information is true $\frac{G}{Date}$

#### STATE OF NEW HAMPSHIRE

# 11133

in a), of \$25 or less.

c) Total of all itemized expenditures reported in detail in section VI.

## Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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DEC 1 0 2018

,	•		DEC 10 5010
I. Name of Lobbyist(s)	Cheryl Steinberg		NEW HAMPSHI
	tnership, firm or corporation, if any		DEPARTMENT OF
	npshire Legal Assistance		
(Name of par	nership; firm or corporation)		
III. Name of Client	N/A	Date _	
to lobbying, including fees f	all fees received from the client identified or services such as public advocacy, goveing legislation, and related legal work.	ernment relations, of	or public relations servic
a) Total of all fees received	in this reporting period	a) \$ ·	0.
b) Total of all fees received (This should equal the to	this calendar year, prior to this reporting potal of all prior monthly reports for this cale		0
c) Total of all fees received	to date	` ^	0
(Add lines a and b)		c) \$	
d) Indicate the amount of a yet been paid	ny such fees that are due, but have not	d) \$	0 ·
fees. Separate reports are the lobbyist(s)/firm that are Expenses are to be reported during the reporting period individual expenses where the lunch where the cost was \$2 being lobbied, purchase of a (c) an itemized statement of any purpose not covered by ceremonial object to be given restaurant expenses for a local purchase of a local purchase of a local purpose not covered by ceremonial object to be given the statement of any purpose not covered by ceremonial object to be given the statement of a local purpose not covered by ceremonial object to be given the statement of a local purpose not covered by ceremonial object to be given the statement of a local purpose not covered by the statement	erships, firms, or corporations are required to be filed for expenditures made relative to unrelated to any one client a separate of in one of three categories of expenses: for salaries, benefits, support staff, and of the expenditure was of \$25.00 or less (for 25.00 or less, purchase of a pen with a value ceremonial object given to a person being each individual expenditure made during the control of the subject of lobbying with a value ento the subject of lobbying with a value egislative reception). Expenses for honor don separate addendums and should not be	o each client and in report may be file (a) the aggregate office expenses; (b) example: meals plue of less than \$10 g lobbied with a value of greate e greater than \$25 rariums, expense r	f expenditures are made and for the lobbyist(s)/fir total of all expenses part of the aggregate total of the aggregate total of the aggregate total of the transparent of \$25.00 or less); and of greater than \$25.00 er than \$25, purchase of the purchase of
support staff, and office exp	for this reporting period for salaries, bene- enses, related directly or indirectly to lobby	ying. a) \$	111.32
h) Total aggregate of evnen	ditures during this reporting period, not re	ported	

c) \$ \_\_

d) Total expenses for this reporting period (Add lines a, b and c)	d)\$		
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e)\$ 2,296.84 f)\$ 2,408.16		
f) Total of all expenses year to date	f)\$ 2,408.16		
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from learned, including by whom paid or to whom charged.	obbying fees during this reporting		
Paid to:	Amount:		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
- <del></del>			
Sworn Statement/Affirmation by Lobbyist			
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affir is true and complete to the best of my knowledge and belief.	m that the foregoing information		
(Signature of lobbyist)	10/29//8 (Date)		
Cheryl Steinberg	,		
(Print Name of lobbyist)			
•			



## 11102

#### STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

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DEC 1 0 2018

I. Name of Lobbyist(s)	1001 5	Slaubaa	DEC 10 ZUI
I. Name of Lobbyist(s)	10151 2:	July 3	NEW HAMPSH
II. Name of lobbyist's part	nership, firm or co	orporation, if any:	DEPARTMENT OF
New Lamps h (Name of partn	ine Legal	Assistance	_
III. Name of Client			Date
Political Contributions For each political contribut client/lobbyist and lobbying	-	^	er 664 paid on behalf of the
Full name of candidate:	Telles	Dan	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	5000	Office Candidate is	Seeking Serate - NH
Full name of candidate:	(T (A))	(Pint Name)	(Middle Name/Initial)
Amount of contribution \$		Office Candidate is	Seeking
actual cost of the in-kind control enter an estimated value and the	ribution on the line ab	pove for amount of contribu	s or services provided, and enter the tion. If the actual cost is not known
Full name of candidate:			
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	(Last Name)		(Middle Name/Initial) Seeking

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."
(If more than three contributions were made, report additional contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.
(Signature of lobbyist)  (Date)
Chen Sleich erz (Print Name 8f lobbyist)

